263/ Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Robert Chamberlain

Application No.: 10/044,616

Filing Date:

January 11, 2002

OIPE CIE

MAIL STOP AMENDMENT

Group Art Unit: 2631

Examiner: Anika F. Talapatra

Confirmation No.: 9468

Title: METHOD AND APPARATUS FOR FEATURE RECOGNITION TIME SHIFT CORRELATOR

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Enc	losed is a reply for the above-identified patent application.		
	A Petition for Extension of Time is also enclosed.		
	Terminal Disclaimer(s) and the \$\infty\$\$ \$65.00 (2814) \$\infty\$\$ \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. \(\) 1.20(d) are also enclosed.		
	Also enclosed is/are		
	Small entity status is hereby claimed.		
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).		
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.		
	Applicant(s) previously submitted		
	on, for which continued examination is requested.		
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.		
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.		

No additional claim fee is required. An additional claim fee is required, and is calculated as shown below. **AMENDED CLAIMS** Highest No. No. of Claims **Extra Claims** Additional Fee Rate of Claims **Previously** Paid For Total Claims 30 0 MINUS 30 = × \$50.00 (1202) = \$ 0.00 Independent Claims 3 **MINUS** × \$200.00 (1201) = 3 \$ 0.00 If Amendment adds multiple dependent claims, add \$360.00 (1203) \$ 0.00 Total Claim Amendment Fee \$ 0.00 Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee \$ 0.00 TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT \$ 0.00 A check in the amount of __ _____ is enclosed for the fee due. ☐ Charge to Deposit Account No. 02-4800. ☐ Charge to credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate. Respectfully submitted,

P.O. Box 1404 Alexandria, Virginia 22313-1404

Date: July 6, 2005

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Ву

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JUL 0 6 2005

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AMENDMENT

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Sir:

In response to the Office Action dated April 6, 2005, kindly amend the aboveidentified patent application as follows: